

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7	/					
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46		/				
47		/				
48		/				
49	/					
50		/				
Total Indep	9					
Total Depend	46					
Total Claims	55					

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS						
	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						